## REQUEST FOR PRIVATE MINE SAFETY TRAINING SESSION REGISTRATION FORM

Commerce-S&B-Field Operations Bureau-Mine Safety Program
(Will only be accepted by either faxing or mailing to the address below by Thursday, November 30,
2000. Requests not submitted properly will be denied.)

We are only able to conduct 30 private sessions. If interested in a private session, the minimum class size must be 30 and the maximum is 75. The number of sessions per company may be limited. When requesting first and second preference, please request dates after the week of January 15. Our first open training sessions start that week. Registration form must be faxed to 608-267-0592 or mailed to the address below. Requests not submitted properly will be denied.

Companies that have paid a Safety Service Fee in 2000 will not be charged. All others will be charged \$250 per sessions.

Please Print: (PLEASE COMPLETE ACCUR.	ATELY - USED TO VERIFY ATTENDEE	WITH COMPANY)	
COMPANY NAME			
OFFICE CONTACT			
ADDRESS			
CITY	STA	TE	ZIP
DAY PHONE NO			ZH
CHECK ITEMS THAT PERTAI	N TO YOU: (MUST BE COMPLET)	ED-USED TO MEET	`FEDERAL REPORTING REQUIREMENTS)
SURFACE MINE (Mine dev	elopment, drilling, blasting, extraction, mi	illing, crushing, scree	en or sizing of materials at a mine.
	maintenance and repair of mining equipm n these activities.)	nent on site associat	ed with naulage of materials within the
☐ 1-19 Employes	☐ 20-49 Employes	☐ 50+ I	Employes
_	ACTOR (Any person, partnership, corporganization that contract to present or independent contractor definition above.)	erform services at a m	corporation, firm associations, or other nine operation.)
NUMBER ATTENDING:			
LOCATION OF SESSIONS:			
<b>FACILITY NAME:</b> _			
CITY:			
FIRST PREFERENCE WEEK:			
SECOND PREFERENCE WEEK	Κ:		
You will be contacted in Janu	uary regarding your request.		
<b>MUST BE MAILED TO:</b>	Safety and Buildings-Cred PO Box 1484	lential Unit	
OR	Madison, WI 53701-1484 Telephone No. 608-261-85	00	
FAXED TO:	608-267-0592		